Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Ann-Marie First name P Middle name Schmidt Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2477	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	1629 North Charles	If Debtor 2 lives at a different address:
		Saginaw, MI 48602 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Saginaw	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Ann-Marie P Schm	nidt			Case number (if known)	
Par	t 2: Tell the Court About	Your Bankruptcy C	ase			
7.	The chapter of the Bankruptcy Code you are choosing to file under			of each, see <i>Notice Required by 1</i> page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Banki box.	ruptcy
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how y	ou may pay. Typion r attorney is subm	cally, if you are paying the fee you	with the clerk's office in your local court for mor urself, you may pay with cash, cashier's check, c lf, your attorney may pay with a credit card or ch	or money
				allments. If you choose this option (Official Form 103A).	n, sign and attach the Application for Individuals	to Pay
		· ·		,	only if you are filing for Chapter 7. By law, a jud	lge may,
		but is not re applies to yo	quired to, waive your family size and	our fee, and may do so only if you d you are unable to pay the fee in	ir income is less than 150% of the official poverty installments). If you choose this option, you must all Form 103B) and file it with your petition.	y line that
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		District		When	Case number	
		District		When	Case number	
		District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debtor			Relationship to you	
		District		When	Case number, if known	
		Debtor			Relationship to you	
		District		When	Case number, if known	
11.	Do you rent your residence?	□ No. Go to	line 12.			
	residence:	■ Yes. Has y	our landlord obtai	ned an eviction judgment against	you?	
		•	No. Go to line 1	2.		
			Yes. Fill out <i>Init</i> bankruptcy petit		udgment Against You (Form 101A) and file it wit	h this

Deb	otor 1 Ann-Marie P Schn	nidt			Case number (if known)
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	9
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir	ndicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.	<u> </u>		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Ann-Marie P Schmidt Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Ann-Marie P Schn	nidt		Case num	nber (if known)
Par	t 6: Answer These Quest	ons for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are descended from the consumer debts are defended from the consumer debts are descended from the consumer debts.	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are debuyestment or through the operation of the b	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	u owe that are not consumer debts or busin	ness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		7. Do you estimate that after any exempt pravailable to distribute to unsecured creditors.	roperty is excluded and administrative expenses ors?
	administrative expenses		■ No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99)	☐ 5001-10,000	☐ 50,001-100,000
	owe:	☐ 100-1		□ 10,001-25,000	☐ More than100,000
		200-9	.99 		
19.	How much do you estimate your assets to	= \$0 - \$	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			.001 - \$500,000 .001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	550.000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	to be:	\$ 100,	,001 - \$500,000	□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion
		□ \$500,	,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	7: Sign Below				
For	you	I have ex	camined this petition, and I d	declare under penalty of perjury that the inf	formation provided is true and correct.
				r 7, I am aware that I may proceed, if eligibe e relief available under each chapter, and l	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
		If no atto documer	rney represents me and I dint, I have obtained and read	d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, United States Code, s	specified in this petition.
		bankrupt and 357	tcy case can result in fines u		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Ann-Ma	arie P Schmidt e of Debtor 1	Signature of Del	btor 2
		Executed	d on April 29, 2019	Executed on	
			MM / DD / YYYY		MM / DD / YYYY

Ann-Marie P Schmidt	Case number (if known)
	<u>-</u>

For your attorney, if you are represented by one

Debtor 1

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joshua	a M. Reinert	Date	April 29, 2019	
Signature of	f Attorney for Debtor		MM / DD / YYYY	
Joshua M	. Reinert P66185			
Reinert &	Reinert			
3434 Dave	enport Avenue			
Saginaw,	MI 48602			
	City, State & ZIP Code			
Contact phone	(989) 799-8860	Email address	ecf@mcreinert.com	
P66185 MI	1			
Bar number & S	Itate			

Certificate Number: 12459-MIE-CC-032523379



CERTIFICATE OF COUNSELING

I CERTIFY that on March 29, 2019, at 1:34 o'clock PM PDT, Ann-Marie Schmidt received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Michigan, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 29, 2019

By: /s/Amanda Alumbaugh

Name: Amanda Alumbaugh

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this information to identify your ca	se:			
Deb	tor 1 Ann-Marie P Schmi	dt			
Deb	First Name	Middle Name	Last Name		
1	ise if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Cas (if kno	e number 			_	if this is an led filing
Su			nd Certain Statistical Information	-	2/15
infor	mation. Fill out all of your schedules original forms, you must fill out a ne	first; then complete th	are filing together, both are equally responsible to information on this form. If you are filing amend the box at the top of this page.		
rare	ounnanies Four Associ			Your as	esets
					f what you own
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from	n 106A/B) n Schedule A/B		\$	500.00
	1b. Copy line 62, Total personal proper	rty, from Schedule A/B		\$	650.00
	1c. Copy line 63, Total of all property o	n Schedule A/B		\$	1,150.00
Part	2: Summarize Your Liabilities				
				Your lia	bilities you owe
2.	Schedule D: Creditors Who Have Clair 2a. Copy the total you listed in Column		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	100,804.94
3.	Schedule E/F: Creditors Who Have Un 3a. Copy the total claims from Part 1 (secured Claims (Official priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	5,157.50
	3b. Copy the total claims from Part 2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	87,508.00
			Your total liabilities	\$	193,470.44
Part	3: Summarize Your Income and Ex	kpenses			
4.	Schedule I: Your Income (Official Form Copy your combined monthly income for		<i>I</i>	\$	1,477.00
5.	Schedule J: Your Expenses (Official Fo Copy your monthly expenses from line			\$	1,477.00
Part	4: Answer These Questions for Ad	Iministrative and Stati	stical Records		
6.	Are you filing for bankruptcy under on the No. You have nothing to report on the No. You have nothing the N	• • •	neck this box and submit this form to the court with y	our other sch	edules.
7.	■ Yes What kind of debt do you have?				
	Your debts are primarily consul	mer debts. Consumer c	debts are those "incurred by an individual primarily fo	r a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules. Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

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page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,206.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,157.50
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	36,710.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	41,867.50

Dobi	or 1 Ann-Marie P Schmidt				
		liddle Name Last Name			
Debt		California de Maria			
Spou	e, if filing) First Name N	liddle Name Last Name			
Jnite	d States Bankruptcy Court for the: EASTE	RN DISTRICT OF MICHIGAN			
Case	number				Check if this is an
					amended filing
)ff	cial Form 106A/B				
<u> </u>	hedule A/B: Property	,			12/15
	<u> </u>	ist an asset only once. If an asset fits in more than one	category list the a	sset in the c	ategory where you
_	No. Go to Part 2.				
.1	Mastrota Timoshava	What is the property? Check all that apply			
.1	Westgate Timeshare Street address, if available, or other description	Single-family home	Do not deduct sectifie amount of any		
.1	Westgate Timeshare Street address, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct sectifie amount of any Creditors Who Har	secured clain	ns on Schedule D:
.1	_	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any	secured clain	ns on Schedule D:
.1	_	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	the amount of any Creditors Who Han	secured clain ve Claims Sec	ns on Schedule D: cured by Property.
i. 1	Street address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any Creditors Who Hard Current value of the entire property?	secured clain ve Claims Sec the Cur por	ns on Schedule D: cured by Property.
-	Street address, if available, or other description	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	the amount of any Creditors Who Hard Current value of the entire property?	secured clains Secured claims Secure	ns on Schedule D: cured by Property. rrent value of the tion you own? \$500.00
.1 -	Street address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any Creditors Who Hard Current value of the entire property? \$500 Describe the nature of the entire property the entire property?	secured claims Secure	ns on Schedule D: cured by Property. rrent value of the tion you own?
.1	Street address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of tentire property? \$500 Describe the natu (such as fee simple a life estate), if kn	secured claims the Cur por 0.00 ure of your or ole, tenancy l	rrent value of the tion you own? \$500.00 whereship interest
.1	Street address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	the amount of any Creditors Who Hard Current value of the entire property? \$500 Describe the nature (such as fee simple)	secured claims the Cur por 0.00 ure of your or ole, tenancy l	rrent value of the tion you own? \$500.00 whereship interest
.1	Street address, if available, or other description City State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of tentire property? \$500 Describe the natu (such as fee simple a life estate), if kn	secured claims the Cur por 0.00 ure of your or ole, tenancy l	rrent value of the tion you own? \$500.00 whereship interest
.1	Street address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any Creditors Who Hard Current value of the entire property? \$500 Describe the nature (such as fee simple a life estate), if kn Joint tenant Check if this	secured claims Secured Claims Secured Claims Secured Curpor D.00	rrent value of the tion you own? \$500.00 whership interest by the entireties, o
.1	Street address, if available, or other description City State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another	current value of the entire property? \$500 Describe the nature (such as fee simple a life estate), if kind Joint tenant Check if this (see instructions)	secured claims Secured Claims Secured Claims Secured Curpor D.00	rrent value of the tion you own? \$500.00 whership interest by the entireties, o
.1	Street address, if available, or other description City State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	current value of the entire property? \$500 Describe the nature (such as fee simple a life estate), if kind Joint tenant Check if this (see instructions)	secured claims Secured Claims Secured Claims Secured Curpor D.00	rrent value of the tion you own? \$500.0 wherestip interest by the entireties, o
	Street address, if available, or other description City State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter	current value of the entire property? \$500 Describe the nature (such as fee simple a life estate), if kind Joint tenant Check if this (see instructions)	secured claims Secured Claims Secured Claims Secured Curpor D.00	rrent value of the tion you own? \$500.0 wherestip interest by the entireties, o
	Street address, if available, or other description City State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter	current value of the entire property? \$500 Describe the nature (such as fee simple a life estate), if kind Joint tenant Check if this (see instructions)	secured claims Secured Claims Secured Claims Secured Curpor D.00	rrent value of the tion you own? \$500.0 wherestip interest by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt	tor 1 🗛	nn-Marie P	Schmidt		Case number (if known)	
3. C a	ars, vans.	trucks. tract	ors, sport utility ve	hicles, motorcycles		
			, epo			
	Yes					
0.4		Chevrole	•	William Control of the Control of th	Do not deduct se	cured claims or exemptions. Put
3.1	Make: Model:	Equinox		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	y secured claims on Schedule D: ave Claims Secured by Property.
	Year:	2018		Debtor 2 only	Current value of	
	Approxim	ate mileage:	23,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:		At least one of the debtors and another		
	LEASE	D		_	¢	0.00 \$0.00
				☐ Check if this is community property (see instructions)	<u>Ψ</u>	0.00 \$0.00
				(
■ □ 5 A	No Yes dd the do	llar value of	the portion you ow	tercraft, fishing vessels, snowmobiles, motorcy n for all of your entries from Part 2, includin	ng any entries for	* 0.00
				hat number here		\$0.00
Part :	3: Descril	e Your Perso	nal and Household Ite	ems		
				erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E.			urnisnings ces, furniture, linens,	china, kitchenware		
			Household furn	iture, furnishings and appliances.		\$325.00
<i>E</i> .		ncluding cell	nd radios; audio, vide phones, cameras, m	eo, stereo, and digital equipment; computers, p edia players, games	rinters, scanners; music o	collections; electronic devices
			Laptop and cell	phone		\$125.00
E		Antiques and other collection	figurines; paintings, ons, memorabilia, col	prints, or other artwork; books, pictures, or othe lectibles	er art objects; stamp, coin	, or baseball card collections;
E	xamples: \$	musical instru	graphic, exercise, an	d other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kayaks; carpentry tools;
		SCIDE				
	F irearms Examples. I _{No}	Pistols, rifles	s, shotguns, ammunit	ion, and related equipment		

Official Form 106A/B

Schedule A/B: Property

De	ebtor 1	Ann-Marie P Schmidt Case number (if known)	
	☐ Yes.	Describe	
11	Clothe	•	
		oles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No		
	■ Yes.	Describe	
		Personal clothing	\$150.00
12.	Jewelr Exami	y o <i>l</i> es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, <u>c</u>	ıold. silver
	□ No [′]		,
	Yes.	Describe	
		Costume jewelry	\$50.00
13.		rm animals oles: Dogs, cats, birds, horses	
	■ No		
	☐ Yes.	Describe	
14.	Any ot	her personal and household items you did not already list, including any health aids you did not list	
	■ No		
	☐ Yes.	Give specific information	
15		he dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$650.00
Pa	rt 4: De	scribe Your Financial Assets	
Do	you ov	n or have any legal or equitable interest in any of the following?	Current value of the portion you own?
			Do not deduct secured
			claims or exemptions.
16.	Cash	Ver Manager and have in your wellet in your home in a cofe denseit have and an hand when you file your patiti	
	■ No	oles: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petiti	JII
	☐ Yes		
17	Denos	its of money	
.,.		oles: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage l	nouses, and other similar
	■ No	institutions. If you have multiple accounts with the same institution, list each.	
18.	Bonds	, mutual funds, or publicly traded stocks	
	Examp	oles: Bond funds, investment accounts with brokerage firms, money market accounts	
	■ No	Institution or issuer name:	
	⊔ Yes	mondation of issuel finance.	
19.		ıblicly traded stock and interests in incorporated and unincorporated businesses, including an interes enture	t in an LLC, partnership, and
	■ No	S. Mario	
	☐ Yes.	Give specific information about them	
		Name of entity: % of ownership:	
20.		nment and corporate bonds and other negotiable and non-negotiable instruments	
		able instruments include personal checks, cashiers' checks, promissory notes, and money orders. egotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	■ No		
	☐ Yes.	Give specific information about them	

Official Form 106A/B

page 3

Schedule A/B: Property

De	ebtor 1 Ann-Marie I	P Schmidt	Case number (i	f known)
		Issuer name:		
	Retirement or pension Examples: Interests in No		403(b), thrift savings accounts, or other pension or profit-	sharing plans
	☐ Yes. List each accou	nt separately. Type of account:	Institution name:	
	Examples: Agreement	ed deposits you have made s	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications	companies, or others
	■ No □ Yes		Institution name or individual:	
23.	_ `	or a periodic payment of mon	ey to you, either for life or for a number of years)	
	■ No □ Yes	ssuer name and description.		
	26 U.S.C. §§ 530(b)(1),	ion IRA, in an account in a c 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tui	ition program.
	■ No □ Yes	nstitution name and description	on. Separately file the records of any interests.11 U.S.C. §	§ 521(c):
25.	Trusts, equitable or fu	uture interests in property (other than anything listed in line 1), and rights or pow	vers exercisable for your benefit
	☐ Yes. Give specific in	formation about them		
			nd other intellectual property eds from royalties and licensing agreements	
	■ No Yes. Give specific in	formation about them		
		and other general intangible rmits, exclusive licenses, coo	les perative association holdings, liquor licenses, profession	al licenses
	☐ Yes. Give specific in	formation about them		
М	oney or property owed	to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to	you		
	■ No □ Yes. Give specific inf	formation about them, including	ng whether you already filed the returns and the tax years	5
	_ '	r lump sum alimony, spousal s	support, child support, maintenance, divorce settlement,	property settlement
	■ No □ Yes. Give specific inf	ormation		
			nents, disability benefits, sick pay, vacation pay, workers eone else	' compensation, Social Security
	Yes. Give specific in	formation		
	Interests in insurance Examples: Health, disa No		n savings account (HSA); credit, homeowner's, or renter's	s insurance
		ance company of each policy Company name:	and list its value. Beneficiary:	Surrender or refund value:

Official Form 106A/B

page 4

Schedule A/B: Property

Debtor 1 Ann-Marie P Schmidt Case number (if known)	
 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recommend someone has died. ■ No □ Yes. Give specific information 	eive property because
 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim 	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights t ■ No □ Yes. Describe each claim	o set off claims
35. Any financial assets you did not already list ■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$0.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
■ No. Go to Part 6. □ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.	
☐ Yes. Go to line 47.	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No □ Yes. Give specific information	
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Debtor	1 Ann-Marie P Schmidt		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Pa	art 1: Total real estate, line 2			\$500.00
56. Pa	art 2: Total vehicles, line 5	\$0.00		
57. Pa	art 3: Total personal and household items, line 15	\$650.00		
58. Pa	art 4: Total financial assets, line 36	\$0.00		
59. Pa	art 5: Total business-related property, line 45	\$0.00		
60. Pa	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	ert 7: Total other property not listed, line 54	+ \$0.00		
62. To	otal personal property. Add lines 56 through 61	\$650.00	Copy personal property total	\$650.00
63. To	otal of all property on Schedule A/B. Add line 55 + line 62			\$1,150,00

Debtor 1	Ann-Marie P Sch	nmidt		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:			Charleif this is as
ii Kilowii)				☐ Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	y the Pro	perty	You	Claim	as	∟xem∣	pt

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	Westgate Timeshare Line from Schedule A/B: 1.1	\$500.00		\$0.00	11 U.S.C. § 522(d)(5)			
	Line Ironi Schedule AVD.			100% of fair market value, up to any applicable statutory limit				
	2018 Chevrolet Equinox 23,000 miles LEASED	\$0.00		\$0.00	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	Household furniture, furnishings and appliances.	\$325.00		\$325.00	11 U.S.C. § 522(d)(3)			
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Laptop and cellphone Line from Schedule A/B: 7.1	\$125.00		\$125.00	11 U.S.C. § 522(d)(3)			
	Elle Holli ochedate AVB. 7.1			100% of fair market value, up to any applicable statutory limit				
	Personal clothing Line from Schedule A/B: 11.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)			
	Line Holli Schedule AVD. TT-T			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
		e jewelry Schedule A/B: 12.1	\$50.00	\$50.00		11 U.S.C. § 522(d)(4)	
	Line from	Scriedule AVB. 12.1	100% of fair market value, up to any applicable statutory limit		, , , , , , , , , , , , , , , , , , ,		
3.	•	claiming a homestead exemption of to adjustment on 4/01/22 and every 3			led on or after the date of adjustme	nt.)	
	■ No		•				
	☐ Yes	. Did you acquire the property covere	ed by the exemption wit	thin 1	,215 days before you filed this case	9?	
		No					
		Yes					

Fill in this information to identify yo	ur case:			
Debtor 1 Ann-Marie P So	chmidt			
First Name	Middle Name Last Name	1	-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for the	EASTERN DISTRICT OF MICHIGAN		-	
Case number				if this is an ded filing
Official Form 106D Schedule D: Creditors	s Who Have Claims Secur	ed by Propert	у	12/15
	If two married people are filing together, both arout, number the entries, and attach it to this form			
1. Do any creditors have claims secured b	y your property?			
-	this form to the court with your other schedules	s. You have nothing else	to report on this form.	
Yes. Fill in all of the information		3		
Part 1: List All Secured Claims	bolow.			
		. Column A	Column B	Column C
	more than one secured claim, list the creditor separas a particular claim, list the other creditors in Part 2. ical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Ditech Financial LLC	Describe the property that secures the claim:	\$99,798.00	\$104,000.00	\$0.00
Creditor's Name	335 North Maple Street Flushing, MI 48433 Not debtor's property, house awarded to ex-husband in Judgment of Divorce			
P.O. Box 15009 Tempe, AZ 85284	As of the date you file, the claim is: Check all tha apply. Contingent	t		
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage o car loan)	r secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit	•		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ge		

Date debt was incurred 06/04

Last 4 digits of account number

3891

Debto	or 1	Ann-Marie P Schmidt		Case	number (if known)				
		First Name Middle N	ame Last Name						
2.2	Wor	rldMark by Wyndham	Describe the property that secures the	claim:	\$1,006.94	\$500.00	\$506.94		
		or's Name	Westgate Timeshare		+ 1,000101	-	*		
	D 0	Day 02042	As of the date you file, the claim is: Che	ck all that					
		. Box 93843 Vegas, NV 89193	apply. Contingent						
_		er, Street, City, State & Zip Code	☐ Unliquidated						
			☐ Disputed						
Who d	owes	s the debt? Check one.	Nature of lien. Check all that apply.						
☐ Del		•	An agreement you made (such as mor	tgage or secured					
☐ Del		•	car loan)						
_		1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)					
_		one of the debtors and another	☐ Judgment lien from a lawsuit		_				
		if this claim relates to a unity debt	Other (including a right to offset)	ies and Fees	S				
Date d	lebt v	was incurred	Last 4 digits of account number	6706					
Add	the o	dollar value of your entries in C	olumn A on this page. Write that number	here:	\$100,804.94				
			the dollar value totals from all pages.		\$100,804.94				
write	e tna	t number here:			V 100,00 IIO I				
Part 2	2: L	ist Others to Be Notified fo	r a Debt That You Already Listed						
trying than o	to co	ollect from you for a debt you o reditor for any of the debts that	e notified about your bankruptcy for a de we to someone else, list the creditor in P you listed in Part 1, list the additional cr	art 1, and then li	ist the collection agency	here. Similarly, if you	have more		
debts	ın Pa	art 1, do not fill out or submit th	us page.						
	Nam	ne, Number, Street, City, State & 2	Zip Code	On which line	e in Part 1 did you enter th	ne creditor? 2.2			
	Att	n: ARDA-ROC	·	On which his	c in r art r did you ontor th	<u> </u>			
	_	D. Box 96204		Last 4 digits	of account number				
	Las	s Vegas, NV 89193							
	Nam	ne, Number, Street, City, State & 2	Zin Code	On which the	- i- Don't 4 did and a did				
		ckwell Recovery	Elp Code	On which line	e in Part 1 did you enter th	ie creditor?			
		North Drinkwater Blve	ed, Suite 200	Last 4 digits of account number					
	Sco	ottsdale, AZ 85251							
		N	7' 0 1						
		ne, Number, Street, City, State & Innacle Recovery Inc.	Zip Code	On which line	e in Part 1 did you enter th	ne creditor? 2.2			
		D. Box 130848		Last 4 digits of account number					
	Cai	rlsbad, CA 92013							
П									
ш		ne, Number, Street, City, State &	Zip Code	On which line	e in Part 1 did you enter th	ne creditor? 2.2			
		stgate Las Vegas 00 Paradise Rd		Loot 4 digita	of account number				
		s Vegas, NV 89109		Last 4 digits	or account number				
	Nam	ne, Number, Street, City, State & 2	Zip Code	On which line	e in Part 1 did you enter th	ne creditor? 22			
	Wo	IdMark By Wyndham		On which him	e iii Fait Tulu you enter ti	ie creditor:			
		D. Box 97976		Last 4 digits	of account number				
	Las	s Vegas, NV 89193							
		Normalism Or 11 O' O' O'	7:- O- d-			<u>.</u> -			
		ne, Number, Street, City, State & 2 orldMark by Wyndham	ZIP Code	On which line	e in Part 1 did you enter th	ne creditor? 2.2			
		ention: Sarah Dragoo		Last 4 digits	of account number				
	P.C	D. Box 97976		· ·	_				
	Las	s Vegas, NV 89193							

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debto	1 Ann-Marie P Schmidt			Case number (if known)
	First Name	Middle Name	Last Name	
	Name, Number, Stree	et, City, State & Zip Code		On which line in Part 1 did you enter the creditor? 2.2
	WorldMark, the	Club		On which line in that I aid you office the ordulor:
	P.O. Box 74263	4		Last 4 digits of account number
	Los Angeles, C.	A 90074		

Fil	l in this inform	ation to identify your c	ase:						
De	ebtor 1	Ann-Marie P Schn	nidt Middle Nam	e Last N	ame				
De	ebtor 2	Tilstrame	Wilder Nam	Lastin	ame				
(Sp	ouse if, filing)	First Name	Middle Nam	e Last N	ame				
Un	ited States Bar	kruptcy Court for the:	EASTERN DIS	STRICT OF MICHIGAN					
	nse number								if this is an ed filing
Sc Be a	as complete and	/F: Creditors W accurate as possible. Use	e Part 1 for credit	ors with PRIORITY claim	s and Part 2 fo				
Sch Sch left.	edule G: Execut edule D: Credito	racts or unexpired leases or contracts and Unexpires Who Have Claims Secuinuation Page to this pageber (if known).	red Leases (Office ared by Property.	ial Form 106G). Do not ir If more space is needed,	clude any cre copy the Par	ditors with partially s you need, fill it out,	ecured clai	ms that a entries ir	re listed in
Pa	rt 1: List All	of Your PRIORITY Un	secured Claims	S					
1.	Do any credito	rs have priority unsecured	d claims against	you?					
	☐ No. Go to Pa	art 2.							
	Yes.								
2.	identify what typ possible, list the	priority unsecured claims e of claim it is. If a claim has claims in alphabetical orde han one creditor holds a par	s both priority and r according to the	nonpriority amounts, list th creditor's name. If you have	at claim here a e more than tw	nd show both priority a	nd nonprior	ity amount	s. As much as
	(For an explana	tion of each type of claim, s	ee the instructions	for this form in the instruct	ion booklet.)	Total claim	Priority amount		Nonpriority amount
2.1	Internal	Revenue Service	Last	4 digits of account number	per 2477	\$1,353.50		\$0.00	\$1,353.50
	SBSÉ/In	ditor's Name solvency Unit x 330500 Stop 15	Whe	n was the debt incurred?	04/15/1	_	-		
	Detroit,	MI 48232							
		reet City State Zip Code		f the date you file, the cla	iim is: Check a	all that apply			
		the debt? Check one.		Contingent					
	Debtor 1 or	nly	□ (Inliquidated					
	Debtor 2 or	nly		isputed					
	Debtor 1 ar	nd Debtor 2 only	Туре	of PRIORITY unsecured	claim:				
	☐ At least one	e of the debtors and anothe	r 🗆 🗈	☐ Domestic support obligations					
	☐ Check if th	nis claim is for a commun	itv debt	■ Taxes and certain other debts you owe the government					
		ubject to offset?	-	☐ Claims for death or personal injury while you were intoxicated					
	■ No	•		Other. Specify					
	☐ Yes				rsonal inco	me taxes			

De	btor 1 Ann-Marie P Schmidt		Case no	umber (if known)		
2.2	Internal Revenue Service	Last 4 digits of account number	2477	\$3,804.00	\$3,804.00	\$0.00
	Priority Creditor's Name SBSE/Insolvency Unit P.O. Box 330500 Stop 15 Detroit, MI 48232	When was the debt incurred?	4/2019			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check al	Il that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the	government		
	Is the claim subject to offset?	Claims for death or personal inj	ury while you	u were intoxicated		
	No	Other. Specify				
	Yes	2018 1040	Personal	Income Taxes		
2.3		Last 4 digits of account number	2477	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Collection/Bankruptcy Unit P.O. Box 30168	When was the debt incurred?				
	Lansing, MI 48909 Number Street City State Zip Code	As of the date you file, the claim	is: Check al	Il that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the	government		
	Is the claim subject to offset?	Claims for death or personal inj	ury while you	u were intoxicated		
	No	Other. Specify				
	Yes	notice pur	poses			
Pa	rt 2: List All of Your NONPRIORITY Unsecu	ired Claims				
2.3	Do any creditors have nonpriority unsecured claim	ns against you?				
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
	Yes.					
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify wh	nat type of cla	aim it is. Do not list claims	already included in Part	1. If more
					Total clain	n

Ist National Bank of Omaha Nonpriority Creditor's Name	Last 4 digits of account number	2406	\$1,381.57
P.O. Box 3412 Dmaha, NE 68103	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify credit card	purchases	
Advance America	Last 4 digits of account number	5385	\$705.1
Nonpriority Creditor's Name 80780 Hoover Road Warren, MI 48093	When was the debt incurred?	2018	
lumber Street City State Zip Code Vho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify unsecured		
Advanced America	Last 4 digits of account number	2407	\$705.15
Nonpriority Creditor's Name	_		V. CO. 1.
31386 Harper Avenue	When was the debt incurred?	2018	
Saint Clair Shores, MI 48082 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	on on an anat appry	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	

■ No

☐ Yes

■ Other. Specify services

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor	Ann-Marie P Schmidt		Case number (if known)	
4.4	Advanced Diagnostic Imaging, P.C.	Last 4 digits of account number	3847	\$76.00
	Nonpriority Creditor's Name 3400 N Center Road Saginaw, MI 48603	When was the debt incurred?	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify services		
4.5	AT & T	Last 4 digits of account number	7558	\$290.00
	Nonpriority Creditor's Name P.O. Box 9001310 Louisville, KY 40290	When was the debt incurred?	10/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.		,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify services		
4.6	Beaumont Laboratory	Last 4 digits of account number	5181	\$36.10
	Nonpriority Creditor's Name P.O. Box 5043	When was the debt incurred?		<u> </u>
	Troy, MI 48007 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify services		

Debtor	Ann-Marie P Schmidt		Case number (if known)	
4.7	CB/Younkers	Last 4 digits of account number	0933	\$826.00
	Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218	When was the debt incurred?	05/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify credit card	purchases	
4.8	Chrysler Capital	Last 4 digits of account number	1000	\$1,014.50
	Nonpriority Creditor's Name P.O. Box 961275 Fort Worth, TX 76161	When was the debt incurred?	05/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify end of term	bill	
4.9	Citibank	Last 4 digits of account number	7638	\$1,425.00
	Nonpriority Creditor's Name P.O. Box 6241	When was the debt incurred?	06/17	
	Sioux Falls, SD 57117-6241 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify credit card	purchases	

Debt	or 1 Ann-Marie P Schmidt	Case number (if known)	
4.1 0	Citibank	Last 4 digits of account number	\$2,663.00
	Nonpriority Creditor's Name P.O. Box 6241 Sioux Falls, SD 57117-6241	When was the debt incurred? 12/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card purchases	
4.1 1	City of Roseville Water Department Nonpriority Creditor's Name	Last 4 digits of account number 6251	\$463.68
	29777 Gratiot Avenue Roseville, MI 48066	When was the debt incurred? 2018	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify utilities	
4.1 2	Comcast	Last 4 digits of account number 9539	\$451.17
	Nonpriority Creditor's Name P.O. Box 70219 Philadelphia, PA 19176	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Services	
	· ·	— ошол ороону	

Debtor 1	Ann-Marie P Schmidt		Case number (if known)	
4.1	Comenity Bank/New York & Co.	Last 4 digits of account number	1713	\$558.00
	Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218	When was the debt incurred?	01/13	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	• •	
	Yes	Other. Specify credit card	purchases	
-	Comenity Bank/PACSNMR Nonpriority Creditor's Name	Last 4 digits of account number	0652	\$1,328.00
	P.O. Box 182789 Columbus, OH 43218	When was the debt incurred?	07/14	
=	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	01 ,	
	Yes	Other. Specify credit card	purchases	
	Comenity Bank/Victoria Secret	Last 4 digits of account number	5952	\$541.00
	Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218-2789	When was the debt incurred?	06/15	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify credit card	purchases	

Debtor	1 Ann-Marie P Schmidt		Case number (if known)	
4.1	Comenity Capital Bank/Ulta	Last 4 digits of account number	6606	\$790.00
	Nonpriority Creditor's Name P.O. Box 182120 Columbus, OH 43218	When was the debt incurred?	09/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify credit card	• •	
		Other. Specify	F	
4.1 7	Comprehensive Breast Care Nonpriority Creditor's Name	Last 4 digits of account number	0009	\$190.94
	3798 Solutions Center Chicago, IL 60677	When was the debt incurred?	2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify services		
4.1	Consumers Energy	Last 4 digits of account number	9757	\$205.15
	Nonpriority Creditor's Name 3201 East Court Street Flint, MI 48501	When was the debt incurred?	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	·	g pians, and other similal debis	
	Yes	Other. Specify services		

Credit One Bank	Last 4 digits of account number	7611	\$1,202.00
Nonpriority Creditor's Name	Last 4 digits of account number		\$1,202.0
P.O. Box 98872 Las Vegas, NV 89193-8872	When was the debt incurred?	04/15	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify credit card	purchases	
DTE Energy	Last 4 digits of account number	9812	\$205.7
Nonpriority Creditor's Name 1 Energy Plaza #WCB2106 Detroit, MI 48226	When was the debt incurred?	12/18	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify services		
Karle Medical Group, PC	Last 4 digits of account number	3665	\$8.6
Nonpriority Creditor's Name			,
455 Barclay Circle, Suite D	When was the debt incurred?	2017	
Rochester Hills, MI 48307 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, ,	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify services		

Kohls Department Store	Last 4 digits of account number	5436	\$677.00
Nonpriority Creditor's Name P.O. Box 3115 Milwaukee, WI 53201	When was the debt incurred?	06/14	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify credit card	purchases	
Lending Club Corp	Last 4 digits of account number	2011	\$25,866.
Nonpriority Creditor's Name 71 Stevenson St Ste 300	When was the debt incurred?	10/17	
San Francisco, CA 94105 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify unsecured	loan	
Marketplace	Last 4 digits of account number		\$0.
Nonpriority Creditor's Name			40.
25261 Huntington Street	When was the debt incurred?	2019	
Roseville, MI 48066 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify notice purp	ooses	

Medical Financial Solutions	Last 4 digits of account number	5001	\$2,699.54
Nonpriority Creditor's Name P.O. Box 50871 Kalamazoo, MI 49005	When was the debt incurred?	11/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	and and address similar dalah	
■ No □ Yes	☐ Debts to pension or profit-sharing ☐ Other. Specify services	g plans, and other similar debts	
	— Officer, Specify		
MGM Detroit Nonpriority Creditor's Name	Last 4 digits of account number		\$175.0
Nonpriority Creditor's Name 1777 3rd Ave Detroit, MI 48226	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
s the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify services		
Oakland Psychological Clinic	Last 4 digits of account number	009	\$13.0
Nonpriority Creditor's Name 2550 South Telegraph Road, Ste.	When was the debt incurred?	11/15	
250 Bloomfield Hills, MI 48302			
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Other. Specify services		

Schedule E/F: Creditors Who Have Unsecured Claims

	Last 4 digits of account number		
Plain Green LLC	Last 4 digits of account number	6599	\$4,396.00
	When was the debt incurred?	08/16	
	As of the date you file, the claim		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	Other. Specify unsecured	loan	
Security Federal Credit Union	Last 4 digits of account number	377	\$100.0
Nonpriority Creditor's Name P.O. Box 5255	When was the debt incurred?		
Grand Blanc, MI 48480 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify unsecured	loan	
Sprint	Last 4 digits of account number		\$562.6
Nonpriority Creditor's Name P.O. Box 17990	When was the debt incurred?		
Denver, CO 80217-0990 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date you me, the claim.	on one an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify services		

SYNCB/American Eagle PLCC	Last 4 digits of account number	9436	\$613	
Nonpriority Creditor's Name P.O. Box 965005 Orlando, FL 32896	When was the debt incurred?	02/15		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated ☐ Disputed			
Debtor 1 and Debtor 2 only				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify credit card purchses			
SYNCB/Gap	Last 4 digits of account number	9587	\$629	
Nonpriority Creditor's Name P.O. Box 965005 Orlando, FL 32896	When was the debt incurred?	03/14		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
☐ Check if this claim is for a community				
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
No	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify			
□Yes				
US Department of Education/GL	Last 4 digits of account number	9679	\$16,519	
Nonpriority Creditor's Name 2401 International	When was the debt incurred?	09/05		
P.O. Box 7859 Madison, WI 53704 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	■ Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	1 1	• • • • • • • • • • • • • • • • • • • •		

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	or 1 Ann-Marie P Schmidt		Case number (if known)	
4.3	US Dept of Education/GL	Last 4 digits of account numbe	_r 9679	\$20,191.00
	Nonpriority Creditor's Name 2401 International P.O. Box 7859 Madison, WI 53704	When was the debt incurred?	08/05	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		paration agreement or divorce that you did no	t
	<u> </u>	report as priority claims	ring plans, and other similar debts	
	■ No □ Yes	·		
	☐ Yes	Other. Specify	nan	_
Part 3	List Others to Be Notified About a		7411	
5. Use to is try	this page only if you have others to be notified ying to collect from you for a debt you owe to a more than one creditor for any of the debts fied for any debts in Parts 1 or 2, do not fill out the collection of the debts of the debts in Parts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, do not fill out the debts 1 or 2, d	ed about your bankruptcy, for a debt that o someone else, list the original creditor that you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection ager	ncy here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo		
	District Court Number: 18-3979GC		Part 1: Creditors with Priority Unsecured C	
	3 Gratiot Road		Part 2: Creditors with Nonpriority Unsecure	ed Claims
Rose	eville, MI 48066	Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	District Court Number: 18-2299GC		Part 1: Creditors with Priority Unsecured C	
2973	3 Gratiot eville, MI 48066		Part 2: Creditors with Nonpriority Unsecure	ed Claims
		Last 4 digits of account number		
39th	and Address District Court	On which entry in Part 1 or Part 2 did you Line 4.9 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured C	laims
2973	Number: 18-1696gc 3 Gratiot Avenue ville, MI 48066		■ Part 2: Creditors with Nonpriority Unsecure	ed Claims
11036		Last 4 digits of account number		
Name and Address 39th District Court Case Number: 18-3285gc		ou list the original creditor? Part 1: Creditors with Priority Unsecured C Part 2: Creditors with Nonpriority Unsecure		
	3 Gratiot Avenue eville, MI 48066		, ,	
11036	, wii 40000	Last 4 digits of account number		
Name and Address Allied Collection Service P.O. Box 1799			ou list the original creditor? Part 1: Creditors with Priority Unsecured C Part 2: Creditors with Nonpriority Unsecure	
Holla	and, MI 49422-1799	Last 4 digits of account number	2. 2. Gradiera marrioripriority oribooute	
Name	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	DirecTV		☐ Part 1: Creditors with Priority Unsecured C	laims
_	Box 6414 I Stream, IL 60197		Part 2: Creditors with Nonpriority Unsecure	ed Claims
Jaio	i Garcani, il 00137	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?		

Beaumont Health System

Schedule E/F: Creditors Who Have Unsecured Claims

Line 4.6 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 Ann-Marie P Schmidt		Case number (if known)
750 Stephenson Highway P.O. Box 5042 Troy, MI 48007-5042		■ Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	
Name and Address CBM Services		Part 1: Creditors with Priority Unsecured Claims
300 Rodd Street, Suite 202 Midland, MI 48640	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address DirecTV	On which entry in Part 1 or Part 2 did you Line 4.5 of (<i>Check one</i>):	ou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 78626 Phoenix, AZ 85062-8626	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Diversified Consultants Inc.	On which entry in Part 1 or Part 2 did yo	ou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 551268 Jacksonville, FL 32255-1268		Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Donald R. Conrad	On which entry in Part 1 or Part 2 did yo	ou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
Attorney at Law 31077 Schoolcraft Road, Ste. 220 Livonia, MI 48150		Part 2: Creditors with Nonpriority Unsecured Claims
Livoina, wii 40130	Last 4 digits of account number	
Name and Address DTE Energy	On which entry in Part 1 or Part 2 did you Line 4.20 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims
P.O. Box 740786		■ Part 2: Creditors with Nonpriority Unsecured Claims
Cincinnati, OH 45274	Last 4 digits of account number	
Name and Address Elizabeth Smith, Andrew Perry,	On which entry in Part 1 or Part 2 did you Line 4.7 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims
Stephanie Pettway and Omar Najor P.O. Box 2044 Warren, MI 48090		■ Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
Elizabeth Smith, Andrew Perry, Stephanie Pettway and Omar Najor		Part 1: Creditors with Priority Unsecured Claims
P.O. Box 2044		■ Part 2: Creditors with Nonpriority Unsecured Claims
Warren, MI 48090	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Elizabeth Smith, Andrew Perry, Stephanie Pettway and Omar Najor		Part 1: Creditors with Priority Unsecured Claims
P.O.Box 2121		■ Part 2: Creditors with Nonpriority Unsecured Claims
Warren, MI 48090	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did yo	
Elizabeth Smith, Andrew Perry, Stephanie Pettway and Omar Najor		Part 1: Creditors with Priority Unsecured Claims
P.O. Box 2044		Part 2: Creditors with Nonpriority Unsecured Claims
Warren, MI 48090	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did yo	
First Bankcard P.O. Box 3331		Part 1: Creditors with Priority Unsecured Claims
Omaha, NE 68103		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Debtor 1 Ann-Marie P Schmidt		Case number (if known)
Name and Address Franklin Collection Service, Inc. P.O. Box 3910 Tupelo, MS 38803	Ī	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Frontline Asset Strategies LLC 2700 Snelling Avenue N, Ste. 250 Saint Paul, MN 55113		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Genesys Regional Medical Center P.O. Box 773273 3273 Solutions Center Chicago, IL 60677-3022		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original graditor?
Global Credit & Collection Corp. P.O. Box 2127 Schiller Park, IL 60176	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Global Payments Check Services, Inc. Att: Customer Service P.O. Box 661038 Chicago, IL 60666		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address IC System Collections P.O. Box 64437		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Saint Paul, MN 55164	Last 4 digits of account number	·
Name and Address Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	On which entry in Part 1 or Part 2 did yo Line 2.1 of (Check one):	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?
Law Office of David A. Bader, LLC	•	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 42348 Cincinnati, OH 45242	I	Part 2: Creditors with Nonpriority Unsecured Claims
O	Last 4 digits of account number	
Name and Address LVNV Funding c/o Resurgent Capital Services P.O. Box 1269		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Greenville, SC 29603	Last 4 digits of account number	
Name and Address LVNV Funding, LLC P.O. Box 10497 Greenville, SC 29603		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Mercantile Adjustment Bureau, LLC P.O. Box 9055 Williamsville, NY 14231-9016		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

Debtor 1 Ann-Marie P Schmidt		Case number (if known)
Name and Address Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 did you Line 4.13 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 did you Line 4.15 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC P.O. Box 1628 Warren, MI 48090	On which entry in Part 1 or Part 2 did you Line 4.9 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 did you Line 4.10 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Midland Funding LLC P.O. Box 1628 Warren, MI 48090	On which entry in Part 1 or Part 2 did you Line 4.10 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Pilot Receivables Management, LLC 10625 Techwoods Circle Cincinnati, OH 45242	On which entry in Part 1 or Part 2 did you Line 4.1 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Assoc Riverside Commerce Center 120 Corporate Blvd Ste 100 Norfolk, VA 23502	On which entry in Part 1 or Part 2 did you Line 4.31 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Assoc Riverside Commerce Center 120 Corporate Blvd Ste 100 Norfolk, VA 23502		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Progressive Financial Services, Inc.	On which entry in Part 1 or Part 2 did yo	ou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

Debtor 1 Ann-Marie P Schmidt		Case number (if known)
P.O. Box 22083 Tempe, AZ 85285		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Third Party Withholding Unit	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Financial Services Bureau Michigan Department of Treasury Box 30785		Part 2: Creditors with Nonpriority Unsecured Claims
Lansing, MI 48909	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
U.S. Attorney-IRS Division	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
101 First Street, Suite 200 Bay City, MI 48708		☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Unifund CCR, LLC	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
10625 Techwoods Circle Cincinnati, OH 45242		■ Part 2: Creditors with Nonpriority Unsecured Claims
Cincillian, OH 43242	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Vital Recovery Services Inc.	Line 4.23 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 923747 Peachtree Corners, GA 30010-3747		■ Part 2: Creditors with Nonpriority Unsecured Claims
1 eachtree corners, CA 30010-3747	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Weber & Olcese PLC	Line 4.32 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 1330 Birmingham, MI 48012-1330		Part 2: Creditors with Nonpriority Unsecured Claims
5	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
XFinity	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
41112 Concept Drive Plymouth, MI 48170		■ Part 2: Creditors with Nonpriority Unsecured Claims
i iyinoddi, Mi 40170	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,157.50
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,157.50
	6f.	Student loans	6f.	T	otal Claim 36,710.00
Total claims					<u> </u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	50,798.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	87,508.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 18 of 18

Fill in this infor	mation to identify your	case:		
Debtor 1	Ann-Marie P Sch	midt		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number				
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 GM Financial P.O. Box 181145 Arlington, TX 76096-1145 2018 Chevrolet Equinox- \$787.00-balance

Official Form 106G

Fill in t	his information to identify your	case:		
Debtor	1 Ann-Marie P Sch	midt		
	First Name	Middle Name	Last Name	
Debtor : (Spouse if		Middle Name	Last Name	
l Initad 9	States Bankruptov Court for the	EASTERN DISTRICT O	E MICHIGAN	
United (States Bankruptcy Court for the:	EASTERN DISTRICT O	PE WICHIGAN	
Case nu (if known)				☐ Check if this is an amended filing
Offic	ial Form 106H			
Sche	edule H: Your Cod	ebtors		12/15
eople a ill it out our na	are filing together, both are equ	ally responsible for supp boxes on the left. Attach Answer every question	olying correct information. If many in the Additional Page to this page.	ete and accurate as possible. If two married ore space is needed, copy the Additional Page, age. On the top of any Additional Pages, write
	,	you are ming a joint case, t	do not list eltrier spouse as a cot	aebioi.
•	Yes			
	Nithin the last 8 years, have yoบ zona, California, Idaho, Louisiana			nmunity property states and territories include nd Wisconsin.)
I	No. Go to line 3.			
	Yes. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?	
in I For	line 2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make sure you	spouse is filing with you. List the person shown I have listed the creditor on Schedule D (Official E Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		<i>lumn</i> 2: The creditor to whom you owe the debt eck all schedules that apply:
				~~11 /
3.1	Frank Jeffrey Schmidt		П	Schedule D, line
0	335 North Maple Street			Schedule E/F, line 4.23
	Flushing, MI 48433			Schedule G
			Ler	nding Club Corp
3.2	Frank Jeffrey Schmidt		■ ;	Schedule D, line2.1
	335 North Maple Street Flushing, MI 48433			Schedule E/F, line
	radining, ini 40400			Schedule G ech Financial LLC
-				
3.3	Frank Jeffrey Schmidt		■ ;	Schedule D, line2.2
	335 North Maple Street Flushing, MI 48433			Schedule E/F, line
	i iusiiiiy, wii 40433			Schedule G
			Wo	rldMark by Wyndham

Page 1 of 2
Best Case Bankruptcy
Entered 04/29/19 12:13:44 Page 41 of 69 Official Form 106H Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-20890-dob Doc 1 Filed 04/29/19 Schedule H: Your Codebtors

Debtor 1 Ann-Marie P Schmidt Case number (if known)

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Duncan Pyscher 9410 West Potter Road Flushing, MI 48433	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G2.1 GM Financial

Official Form 106H Schedule H: Your Codebtors Page 2 of 2
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19-20890-dob Doc 1 Filed 04/29/19 Entered 04/29/19 12:13:44 Page 42 of 69

Fill	l in this information to identify your c	ase:								
De	ebtor 1 Ann-Marie F	Schmidt			_					
1 -	ebtor 2				_					
Un	nited States Bankruptcy Court for the	EASTERN DISTRICT	OF MICHIGAN							
Ca	ase number					Chec	k if this is	:		
(If k	(nown)					l	n amende	Ū		
_									g postpetition ollowing date:	
<u>O</u>	official Form 106I					M	M / DD/ Y	YYYY		
S	chedule I: Your Inc	ome								12/1
atta	oplying correct information. If you buse. If you are separated and you ach a separate sheet to this form. Describe Employment	ır spouse is not filing wi	th you, do not inclu	ıde inforn	nati	on about	your sp	ouse. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job,	Employment status	☐ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Limployment status	■ Not employed				☐ Not e	mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere?				_			
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If $_{ m y}$	ou have nothing to r	eport for a	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have mere space, attach a separate sheet to		mbine the informatio	n for all e	mpl	oyers for	that perso	on on the li	nes below. If	you need
						For Dek	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	<u>-</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

						For	Debtor 1		btor 2 or ing spouse	
	Сору	line 4 here			4.	\$	0.00	\$	N/A	l
5.	List a	all payroll deduction								-
	5a.	Tax, Medicare, a		ity deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contr		•	5b.	_ :	0.00	\$	N/A	-
	5c.	Voluntary contril			5c.	\$	0.00	\$	N/A	-
	5d.	Required repaym		•	5d.		0.00	\$	N/A	-
	5e.	Insurance	icitis of retirein	siit fulla loulis	5e.		0.00	\$	N/A	-
	56. 5f.	Domestic support	rt obligations		5f.	\$—	0.00	\$	N/A	-
	5g.	Union dues	it obligations		_	\$ —		\$	N/A	
	5g. 5h.	Other deductions	e Specify:		5g. 5h.		0.00	+ \$	N/A N/A	-
			· · · —			· —		· 		-
6. -				5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	-
7.	Calcu	ulate total monthly	/ take-nome pay	Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	List a 8a.	profession, or fa Attach a statemen	rental property rm at for each proper and necessary b	d: and from operating a business ty and business showing gross usiness expenses, and the total	s, 8a.	\$	0.00	\$	N/A	
	8b.	Interest and divid	dends		8b.	\$	0.00	\$	N/A	-
	8c.	regularly receive	spousal support,	ou, a non-filing spouse, or a de child support, maintenance, divor t.		\$	0.00	\$	N/A	-
	8d.	Unemployment of	compensation		8d.	\$	672.56	\$	N/A	-
	8e.	Social Security			8e.	\$	0.00	\$	N/A	-
	8f.	Include cash assis	stance and the va such as food stan	at you regularly receive alue (if known) of any non-cash a nps (benefits under the Supplemousing subsidies.		\$	0.00	\$	N/A	
	8g.	Pension or retire	ment income		8g.	\$	0.00	\$	N/A	•
	8h.	Other monthly in	come. Specify:	Help from Family	8h.	+ \$	804.44	+ \$	N/A	
9.	Add a	all other income.	Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.	\$	1,477.00	\$	N/A	
					_					
10.		ulate monthly inco		+ line 9. d Debtor 2 or non-filing spouse.	10.	51	1,477.00 + \$_	I	N/A = \$	1,477.00
11.	Includ other	de contributions from friends or relatives of include any amou	m an unmarried ¡	the expenses that you list in Spartner, members of your householded in lines 2-10 or amounts that	old, your depe				edule J. 11. +\$	0.00
12.		that amount on the		ine 10 to the amount in line 11. hedules and Statistical Summary					12. \$	1,477.00
									Combir monthly	ned y income
13.	Do yo	ou expect an incre	ease or decrease	e within the year after you file t	his form?					-
	_	Yes. Explain:								
	_	. oo. Explain.								

EIII	in this informe	ation to identify	our case:					
	otor 1	ation to identify yo				Ch-	ak if this is:	
Deb	OLOT I	Ann-Marie P	Schmidt			Che	ck if this is: An amended filing	
	otor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bank	ruptcy Court for the	EASTE	RN DISTRICT OF MICHIG	AN	•	MM / DD / YYYY	
	e number							
(If K	nown)							
\bigcirc	fficial Fo	rm 106J						
		J: Your	Exper	ISES				12/15
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer eve	s possible. eded, atta ry question	If two married people ar ch another sheet to this				or supplying correct
Par 1.	ls this a join	ribe Your House nt case?	enoia					
	■ No. Go to	o line 2.	in a separa	ate household?				
		lo	·	al Form 106J-2, <i>Expen</i> ses	for Separate Housel	<i>hold</i> of Deb	otor 2.	
2.	Do vou hav	e dependents?	■ No					
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
								☐ Yes
								☐ Yes
3.		penses include of people other t	han	No				— 165
		d your depende		Yes				
exp	imate your e	a date after the	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	4. \$		300.00
	. ,	ded in line 4:	J : 0					
		estate taxes				4a. \$:	0.00
		estate taxes erty, homeowner's	s. or renter	's insurance		4a. 3 4b. 3		0.00 0.00
		•		pkeep expenses		4c. \$		0.00
		owner's associat	•			4d. \$		0.00
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	<u> </u>	0.00

page 2

Official Form 106J

Debtor 1 Debtor 2 (Spouse if, filing)	Ann-Marie P Schmid		Last Name		
	First Name	Middle Name	Loot None		
			Last Name		
	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case number(if known)				_	heck if this is an mended filing
Official Form			Dalataria Cale	a deda a	
Declarati	on About an	individuai	Debtor's Sch	eaules	12/15
Did you pay ■ No	or agree to pay someon ame of person	e who is NOT an attor	ney to help you fill out bar	akruptcy forms? Attach Bankruptcy Petitic Declaration, and Signatu	
	ty of perjury, I declare that true and correct.	at I have read the sum	mary and schedules filed v	with this declaration and	
X /s/ Ann-	Marie P Schmidt		x		
A B.A	rie P Schmidt		Signature of De	ebtor 2	
Ann-Ma Signature	e of Debtor 1				
Signature	pril 29, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this infor	rmation to identify you	r case:			
Debtor 1	Ann-Marie P Scl				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	EASTERN DISTRICT OF			
Officed States D	ankruptcy Court for the.	LASTERN DISTRICT OF	WICHIOAN		
Case number (if known)				_	Check if this is an amended filing
Official Fo		Affairs for Indivic	luals Filing for B	ankruptcy	4/1
Be as complete information. If I	and accurate as poss	ible. If two married people a attach a separate sheet to	re filing together, both are	equally responsible for su	pplying correct
Part 1: Give	Details About Your Ma	arital Status and Where You	Lived Before		
1. What is you	ur current marital statu	ıs?			
☐ Marrie	d				
■ Not ma	arried				
2. During the	last 3 years, have you	lived anywhere other than	where you live now?		
□ No					
_	ist all of the places you I	ived in the last 3 years. Do no	ot include where you live now	٧.	
Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
	intington Street e, MI 48066	From-To: 2016-9/18	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and territo No Yes. N	ories include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev thedule H: Your Codebtors (Of ar Income	/ada, New Mexico, Puerto R		
Fill in the to	tal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	ill businesses, including part	-time activities.	endar years?
□ No					
Yes. F	ill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

page 1

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$65,786.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$85,809.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No Yes. Fill in the details.	pensions; rental income; inte se and you have income that	rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; an nly once under Debtor 1.	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Unemployment	\$6,208.20		
For last calendar year: (January 1 to December 31, 2018)	Retirement Distribution (gross figure at right before taxes & penalties were withheld)	\$33,561.67		
	401k loan cancellation	\$15,270.29		
For the calendar year before that: (January 1 to December 31, 2017)	Gambling Winnings	\$8,000.00		
	Cancelled Debt	\$2,153.00		
	Retirement Distribution	\$13,754.00		
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcy		
List Sertain Layments 100	made Belefe Tou Flied for	- Lanni aproj		
		u <mark>mer debts.</mark> Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
		r rees		

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

 \square No.

List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

De	btor 1 Ann-Marie P Schmidt		Cas	e number (if known)		
	Yes. Debtor 1 or Debtor 2 or both hat During the 90 days before you file	•		l of \$600 or more	?	
	■ No. Go to line 7.					
		domestic support obligation			you paid that creditor. Do not Also, do not include payments to an	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony. No Yes. List all payments to an insider.	partners; relatives of any gen n control, or owner of 20% o	eral partners; partner or more of their voting	rships of which you	ou are a general partner; corporation ny managing agent, including one fo	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a debt that benefited ar	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
Da	rt 4: Identify Legal Actions, Repossession	one and Foroclosures	paid	Juli Owe	moduc orcator 3 hame	
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.	tcy, were you a party in an				
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Midland Funding LLC v Ann-Marie Schmidt 18-1696 GC	Civil	39th District Court 29733 Gratiot Avenue Roseville, MI 48066 39th District Court 29733 Gratiot Avenue Roseville, MI 48066		□ Pending□ On appeal■ Concluded	
	Midland Funding LLC v Ann Schmidt 18-3285gc	Civil			☐ Pending ☐ On appeal ☐ Concluded	
	Midland Funding LLC v Ann Schmidt 18-3979GC	Civil	39A District Co 29733 Gratiot Roseville, MI 48		☐ Pending ☐ On appeal ☐ Concluded	
	Midland Funding LLC v AnnM Schmidt 18-2299GC	Civil	39A District Co 29733 Gratiot Roseville, MI 48		☐ Pending ☐ On appeal ☐ Concluded	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Ann-Marie P Schmidt				Case numbe	Case number (if known)		
	•				-		
10.		n 1 year before you filed for bankru all that apply and fill in the details be		as any of your property repossessed, foreclose	d, garnished, attache	ed, seized, or levied?	
	_	lo. Go to line 11. 'es. Fill in the information below.					
	Credi	itor Name and Address	De	escribe the Property	Date	Value of the property	
			Ex	plain what happened			
11.	accou	ints or refuse to make a payment be		did any creditor, including a bank or financial in you owed a debt?	nstitution, set off any	amounts from your	
		itor Name and Address	Do	escribe the action the creditor took	Data action was	Amount	
	Credi	nor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount	
12.	court-	appointed receiver, a custodian, or		vas any of your property in the possession of an er official?	assignee for the ben	efit of creditors, a	
Par	t 5:	List Certain Gifts and Contribution	s				
13.	□ N	-	uptcy,	did you give any gifts with a total value of more	than \$600 per persor	1?	
			•	Describe the office	D-(Walaa	
		with a total value of more than \$60 erson	0	Describe the gifts	Dates you gave the gifts	Value	
	Addre						
	Daug	ghter's Boyfriend		2003 Honda Civic	January 2019	\$500.00	
	Perso	on's relationship to you: None					
14.	■ N	•		did you give any gifts or contributions with a too	al value of more thar	n \$600 to any charity?	
	more Chari	or contributions to charities that than \$600 ity's Name ess (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value	
Par	t 6:	List Certain Losses					
	Within		ptcy or	since you filed for bankruptcy, did you lose any	thing because of the	eft, fire, other disaster,	
	■ N	lo					
	□ Y	es. Fill in the details.					
		ribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 7: List Certain Payments or Transfers									
	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prep	Vithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No ■ Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any property		Date payment or transfer was made	Amount of payment				
	Reinert & Reinert 3434 Davenport Avenue Saginaw, MI 48602 ecf@mcreinert.com	\$770.00, \$770.00) (including filing f		3/13/19, 4/22/19	\$1,540.00				
	Abacus Credit Counseling	\$25.00		:	3/29/19	\$25.00				
	www.abacuscc.org									
17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.					transfer any prope	rty to anyone who				
	■ No □ Yes. Fill in the details.									
	Person Who Was Paid Address	Description and v transferred	alue of any property		Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.									
	Person Who Received Transfer Address	•			y property or eceived or debts ange	Date transfer was made				
	Person's relationship to you									
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which yo beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 						of which you are a				
	Yes. Fill in the details. Name of trust	Description and v	alue of the property t	transferred		Date Transfer was made				
Par	t 8: List of Certain Financial Accounts, Ins	truments Safe Denosit	Boxes and Storage	Units						
20.		y, were any financial ac	counts or instrument	ts held in y		, ,				
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	close	account was ed, sold, ed, or	Last balance before closing or transfer				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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transferred

Debtor 1 Ann-Marie P Schmidt Case number (if known)

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securiti cash, or other valuables?						
		No				
	□ \	es. Fill in the details.				
		e of Financial Institution less (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Descri	be the contents	Do you still have it?
22.	Have	you stored property in a storage unit or pl	ace other than your home within 1	year be	efore you filed for bankruptcy	?
		No (es. Fill in the details.				
	_					5 (111
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Descri	ibe the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control for	Someone Else			
23.	•	ou hold or control any property that someoneone.	one else owns? Include any proper	y you k	porrowed from, are storing for	, or hold in trust
	_	No ′es. Fill in the details.				
		er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Descri	ibe the property	Value
Par	t 10:	Give Details About Environmental Informa	ation			
For	the pu	rpose of Part 10, the following definitions	apply:			
	toxic regul	onmental law means any federal, state, or substances, wastes, or material into the a ations controlling the cleanup of these sub	ir, land, soil, surface water, ground ostances, wastes, or material.	water,	or other medium, including st	atutes or
		neans any location, facility, or property as n, operate, or utilize it, including disposal		aw, wh	ether you now own, operate, o	or utilize it or used
		rdous material means anything an environ dous material, pollutant, contaminant, or s		waste,	hazardous substance, toxic s	substance,
Rep	ort all	notices, releases, and proceedings that yo	ou know about, regardless of when	they o	ccurred.	
24.	Has a	ny governmental unit notified you that you	ı may be liable or potentially liable	under	or in violation of an environme	ental law?
		No				
		es. Fill in the details.				
		e of site ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice
25. Have you notified any governmental unit of any release of hazardous material?						
		No				
	_	∕es. Fill in the details.				
	Nam	e of site ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and		vironmental law, if you ow it	Date of notice
			ZIP Code)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

26.	Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ■ No □ Yes. Fill in the details.							
		ise Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case			
Par	t 11	Give Details About Your Business or	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrup	otcv. did vou own a business or have a	nv of	the following connections to an	nv business?			
			in a trade, profession, or other activity	•	•	,			
		☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	nip (Ll	LP)				
		☐ A partner in a partnership			•				
		☐ An officer, director, or managing ex	xecutive of a corporation						
		☐ An owner of at least 5% of the votir	ng or equity securities of a corporation						
		No. None of the above applies. Go to	Part 12.						
			II in the details below for each busines	s.					
	Bu	isiness Name	Describe the nature of the business		Employer Identification number				
		Idress Imber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or ITIN.			
28.		hin 2 years before you filed for bankrup titutions, creditors, or other parties. No Yes. Fill in the details below.	etcy, did you give a financial statement	to an	yone about your business? Inc	lude all financial			
	Ad	ime Idress imber, Street, City, State and ZIP Code)	Date Issued						
Par	t 12	Sign Below							
are with 18 U /s/ An	true a b J.S.C Anr n-M	ead the answers on this Statement of Finand correct. I understand that making a ankruptcy case can result in fines up to c. §§ 152, 1341, 1519, and 3571. n-Marie P Schmidt	a false statement, concealing property,	or ob	taining money or property by fi				
Ī		ure of Debtor 1							
Dat	e _	April 29, 2019	Date						
Did ■ N □ Y	lo	attach additional pages to Your Statem	ent of Financial Affairs for Individuals	Filing	<i>for Bankruptcy</i> (Official Form 1	107)?			
I	lo	pay or agree to pay someone who is no Name of Person . Attach the Bankro							
			•		- ,				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Ann-Marie P Schmidt

Case number (if known)

United States Bankruptcy Court Eastern District of Michigan

In re	Ann-Ma	arie P Schmidt		Case	No.	
-	7		Debtor(s)	Chap		7
			F ATTORNEY FOR D TO F.R.BANKR.P. 20			
	The und	ersigned, pursuant to F.R.Bankr.P. 2016(b), state				
1.		ersigned is the attorney for the Debtor(s) in this c				
2.	The com	pensation paid or agreed to be paid by the Debto	or(s) to the undersigned	is: [Check one]		
	[X]	FLAT FEE	_			
	A.	For legal services rendered in contemplation o exclusive of the filing fee paid			1	,205.00
	B.	Prior to filing this statement, received		· · · · · · · · · · ·	1	,205.00
	C.	The unpaid balance due and payable is		· · · · · · · · ·		0.00
	[]	RETAINER				
	A.	Amount of retainer received		·····		
	В.	The undersigned shall bill against the retainer agreed to pay all Court approved fees and expe				rly rate schedule.] Debtor(s) have
3.	\$335	of the filing fee has been paid.				
4.		for the above-disclosed fee, I have agreed to renot apply.]	nder legal service for all	aspects of the bank	krupto	ey case, including: [Cross out any
	A.	Analysis of the debtor's financial situation, and bankruptcy;	-		_	-
	B. C. D. E. F.	Preparation and filing of any petition, schedule Representation of the debtor at the meeting of a Representation of the debtor in adversary process Reaffirmations; Redemptions;	creditors and confirmati	on hearing, and any	y adjo	ourned hearings thereof;
5.	G. By agree	ement with the debtor(s), the above-disclosed fee A. Motions for relief from the automatic B. Motions to dismiss; C. All post-confirmation professional se D. The professional services described billed at the standard hourly rates of the	stay; ervices and costs; in paragraph 5. (A),	(B), (C) appearir		
6.	The sour A. B.	rce of payments to the undersigned was from: XX Debtor(s)' earnings, wages, c Other (describe, including th	compensation for service			
7.	The und	ersigned has not shared or agreed to share, with a ion, any compensation paid or to be paid except a	any other person, other tas follows:	than with members	of th	e undersigned's law firm or
Dated:	April	29, 2019		/s/ Joshua M. R		
				Attorney for the D Joshua M. Reine Reinert & Reine 3434 Davenport Saginaw, MI 486 (989) 799-8860 6	ert P rt : Ave :602	66185 nue
Agreed:	/s/ An	nn-Marie P Schmidt				
-	Ann-l	Marie P Schmidt	-	Debtor		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	45	filing fee	
\$7	75	administrative fee	
+ \$1	15	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

Page 56 of 69

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Ann-Marie P Schmidt	Debtor(s)		7				
VERIFICATION OF CREDITOR MATRIX								
The abo	The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
Date:	April 29, 2019	/s/ Ann-Marie P Schmidt						

Signature of Debtor

1st National Bank of Omaha P.O. Box 3412 Omaha, NE 68103

39-A District Court Case Number: 18-3979GC 29733 Gratiot Road Roseville, MI 48066

39-A District Court Case Number: 18-2299GC 29733 Gratiot Roseville, MI 48066

39th District Court Case Number: 18-1696gc 29733 Gratiot Avenue Roseville, MI 48066

39th District Court Case Number: 18-3285gc 29733 Gratiot Avenue Roseville, MI 48066

Advance America 30780 Hoover Road Warren, MI 48093

Advanced America 31386 Harper Avenue Saint Clair Shores, MI 48082

Advanced Diagnostic Imaging, P.C. 3400 N Center Road Saginaw, MI 48603

Allied Collection Service P.O. Box 1799 Holland, MI 49422-1799

AT & T P.O. Box 9001310 Louisville, KY 40290 At&T DirecTV P.O. Box 6414 Carol Stream, IL 60197

Attn: ARDA-ROC P.O. Box 96204 Las Vegas, NV 89193

Beaumont Health System 750 Stephenson Highway P.O. Box 5042 Troy, MI 48007-5042

Beaumont Laboratory P.O. Box 5043 Troy, MI 48007

Blackwell Recovery 4150 North Drinkwater Blved, Suite 200 Scottsdale, AZ 85251

CB/Younkers P.O. Box 182789 Columbus, OH 43218

CBM Services 300 Rodd Street, Suite 202 Midland, MI 48640

Chrysler Capital P.O. Box 961275 Fort Worth, TX 76161

Citibank P.O. Box 6241 Sioux Falls, SD 57117-6241

City of Roseville Water Department 29777 Gratiot Avenue Roseville, MI 48066

Comcast P.O. Box 70219 Philadelphia, PA 19176 Comenity Bank/New York & Co. P.O. Box 182789 Columbus, OH 43218

Comenity Bank/PACSNMR P.O. Box 182789 Columbus, OH 43218

Comenity Bank/Victoria Secret P.O. Box 182789 Columbus, OH 43218-2789

Comenity Capital Bank/Ulta P.O. Box 182120 Columbus, OH 43218

Comprehensive Breast Care 3798 Solutions Center Chicago, IL 60677

Consumers Energy 3201 East Court Street Flint, MI 48501

Credit One Bank
P.O. Box 98872
Las Vegas, NV 89193-8872

DirecTV P.O. Box 78626 Phoenix, AZ 85062-8626

Ditech Financial LLC P.O. Box 15009 Tempe, AZ 85284

Diversified Consultants Inc. P.O. Box 551268
Jacksonville, FL 32255-1268

Donald R. Conrad Attorney at Law 31077 Schoolcraft Road, Ste. 220 Livonia, MI 48150 DTE Energy 1 Energy Plaza #WCB2106 Detroit, MI 48226

DTE Energy P.O. Box 740786 Cincinnati, OH 45274

Duncan Pyscher 9410 West Potter Road Flushing, MI 48433

Elizabeth Smith, Andrew Perry, Stephanie Pettway and Omar Najor P.O. Box 2044 Warren, MI 48090

Elizabeth Smith, Andrew Perry, Stephanie Pettway and Omar Najor P.O.Box 2121 Warren, MI 48090

First Bankcard P.O. Box 3331 Omaha, NE 68103

Frank Jeffrey Schmidt 335 North Maple Street Flushing, MI 48433

Franklin Collection Service, Inc. P.O. Box 3910 Tupelo, MS 38803

Frontline Asset Strategies LLC 2700 Snelling Avenue N, Ste. 250 Saint Paul, MN 55113

Genesys Regional Medical Center P.O. Box 773273 3273 Solutions Center Chicago, IL 60677-3022

Global Credit & Collection Corp. P.O. Box 2127 Schiller Park, IL 60176

Global Payments Check Services, Inc. Att: Customer Service P.O. Box 661038 Chicago, IL 60666

GM Financial P.O. Box 181145 Arlington, TX 76096-1145

IC System Collections P.O. Box 64437 Saint Paul, MN 55164

Internal Revenue Service SBSE/Insolvency Unit P.O. Box 330500 Stop 15 Detroit, MI 48232

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Karle Medical Group, PC 455 Barclay Circle, Suite D Rochester Hills, MI 48307

Kohls Department Store P.O. Box 3115 Milwaukee, WI 53201

Law Office of David A. Bader, LLC P.O. Box 42348 Cincinnati, OH 45242

Lending Club Corp 71 Stevenson St Ste 300 San Francisco, CA 94105 LVNV Funding c/o Resurgent Capital Services P.O. Box 1269 Greenville, SC 29603

LVNV Funding, LLC P.O. Box 10497 Greenville, SC 29603

Marketplace 25261 Huntington Street Roseville, MI 48066

Medical Financial Solutions P.O. Box 50871 Kalamazoo, MI 49005

Mercantile Adjustment Bureau, LLC P.O. Box 9055 Williamsville, NY 14231-9016

MGM Detroit 1777 3rd Ave Detroit, MI 48226

Michigan Department of Treasury Collection/Bankruptcy Unit P.O. Box 30168
Lansing, MI 48909

Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108

Midland Funding LLC P.O. Box 1628 Warren, MI 48090

Oakland Psychological Clinic 2550 South Telegraph Road, Ste. 250 Bloomfield Hills, MI 48302

Pilot Receivables Management, LLC 10625 Techwoods Circle Cincinnati, OH 45242

Pinnacle Recovery Inc. P.O. Box 130848 Carlsbad, CA 92013

Plain Green LLC 93 Mack Road Suite 600 P.O. Box 270 Box Elder, MT 59521

Portfolio Recovery Assoc Riverside Commerce Center 120 Corporate Blvd Ste 100 Norfolk, VA 23502

Progressive Financial Services, Inc. P.O. Box 22083
Tempe, AZ 85285

Security Federal Credit Union P.O. Box 5255 Grand Blanc, MI 48480

Sprint P.O. Box 17990 Denver, CO 80217-0990

SYNCB/American Eagle PLCC P.O. Box 965005 Orlando, FL 32896

SYNCB/Gap P.O. Box 965005 Orlando, FL 32896

Third Party Withholding Unit Financial Services Bureau Michigan Department of Treasury Box 30785 Lansing, MI 48909

U.S. Attorney-IRS Division 101 First Street, Suite 200 Bay City, MI 48708 Unifund CCR, LLC 10625 Techwoods Circle Cincinnati, OH 45242

US Department of Education/GL 2401 International P.O. Box 7859 Madison, WI 53704

US Dept of Education/GL 2401 International P.O. Box 7859 Madison, WI 53704

Vital Recovery Services Inc. P.O. Box 923747 Peachtree Corners, GA 30010-3747

Weber & Olcese PLC P.O. Box 1330 Birmingham, MI 48012-1330

Westgate Las Vegas 3000 Paradise Rd Las Vegas, NV 89109

WoldMark By Wyndham P.O. Box 97976 Las Vegas, NV 89193

WorldMark by Wyndham P.O. Box 93843 Las Vegas, NV 89193

WorldMark by Wyndham Attention: Sarah Dragoo P.O. Box 97976 Las Vegas, NV 89193

WorldMark, the Club P.O. Box 742634 Los Angeles, CA 90074 XFinity 41112 Concept Drive Plymouth, MI 48170